

# Collier Shannon Scott



February 2, 2005

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**Re: U.S. Patent Application No.: 10/074,959**  
**For: MULTI-USE SURGICAL CEMENT DISPENSER APPARATUS AND KIT**  
**FOR SAME**  
**Our Reference No.: 53990-00601**

Dear Sir:

Submitted herewith in connection with the above-identified matter is the following document:

- (1) Fee Transmittal in duplicate (2 pages)
- (2) Amendment & Response (19 sheets)

Please date-stamp the enclosed copy of this letter, thereby acknowledging receipt of the above-identified document.

Sincerely yours,

A handwritten signature in black ink that reads "Mark W. Rygiel". The signature is stylized with a large, looped "R".

MARK W. RYGIEL, Reg. No. 45,871

Enclosure

MWR/la

3732/18  
Collier Shannon Scott, PLLC  
Washington Harbour, Suite 400  
3050 K Street, NW  
Washington, DC 20007  
202.342.8400 TEL  
202.342.8451 FAX  
Mark W. Rygiel  
Associate  
(202)342-8480  
MRygiel@colliershannon.com



PTO/SB/17 (10-01)(modified)

OMB 0651-0032

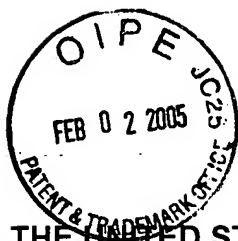
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

|   |                          |                   |
|---|--------------------------|-------------------|
| 0002 (Rev. 10/2001)<br>U.S. Department of Commerce<br>Patent and Trademark Office<br><br><b>FEE TRANSMITTAL</b><br><br><b>TOTAL AMOUNT OF PAYMENT</b><br>Subtotal (1) + Subtotal (2) + Subtotal (3) = <b>\$ 350</b> | <b>Complete if Known</b> |                   |
|   | Application Number       | 10/074,959        |
|   | Filing Date              | February 12, 2002 |
|   | First Named Inventor     | Avery J. Evans    |
|   | Group Art Unit           | 3732              |
|   | Examiner Name            | David A. Bonderer |
|   | Attorney Docket Number   | 53990-00601       |

| METHOD OF PAYMENT   |                              | FEE CALCULATION (continued)  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
|---|------------------------------|--|---------------------------------|------------------------------|------------------------------|-----------------|------------------------|----------------|-----------|-------------------------------------|-----------|---------------|--------------------------|--|-----------|---|-------------|--|---|---|----------|--|--|-----------|-----------|---|--|------------|-----------|--|--|-------------|------------------------|---|---------------------------------|-------------|-------------|--|--|-----------|-----------|------------------|----|-------------|-----------|--|---|-------------|-----------|--------------------------------|-----|-----------|-----------|------------------|------|-----------|-----------|-------------------------------|-----|-----------|-----------|--|--|-----------|-----------|---|--|----------|----------|--|--|-----------|-----------|---|--|-----------|-----------|--|--|----------------------|--|--|--|----------------------|--|--|--|---------------------|--|-------------|--|
| <b>1. The Commissioner is hereby authorized to:</b><br><br><input checked="" type="checkbox"/> Charge the indicated fees to the below mentioned deposit account.<br><br><input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account. <sup>†</sup><br><br><input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27<br><br>Deposit Account Number: 03-2469<br>Deposit Account Name: COLLIER SHANNON SCOTT<br><br>A Duplicate Copy of this authorization is attached<br><br><b>2. <input type="checkbox"/> Payment Enclosed:</b><br><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other |                              | <b>3. ADDITIONAL FEES</b><br><table border="1"><thead><tr><th>Large Entity<br/>Fee Code/Fee</th><th>Small Entity<br/>Fee Code/Fee</th><th>Fee Description</th><th>Fee Due</th></tr></thead><tbody><tr><td>105/\$130</td><td>205/\$65</td><td>Surcharge - late filing fee or oath</td><td></td></tr><tr><td>127/\$50</td><td>227/\$25</td><td>Surcharge-late provisional filing fee or cover sheet</td><td></td></tr><tr><td>147/\$2,520</td><td>147/\$2,520</td><td>For filing a request for reexamination</td><td></td></tr><tr><td>115/\$120</td><td>215/\$60</td><td>Extension for response within first month<sup>†</sup></td><td></td></tr><tr><td>116/\$450</td><td>216/\$225</td><td>Extension for response within second month<sup>†</sup></td><td></td></tr><tr><td>117/\$1020</td><td>217/\$510</td><td>Extension for response within third month<sup>†</sup></td><td></td></tr><tr><td>118/\$1,590</td><td>218/\$795</td><td>Extension for response within fourth month<sup>†</sup></td><td></td></tr><tr><td>128/\$2,160</td><td>228/\$1,080</td><td>Extension for response within fifth month<sup>†</sup></td><td></td></tr><tr><td>119/\$500</td><td>219/\$250</td><td>Notice of Appeal</td><td></td></tr><tr><td>141/\$1,500</td><td>241/\$750</td><td>Petition to revive unintentionally abandoned application</td><td></td></tr><tr><td>142/\$1,400</td><td>242/\$700</td><td>Utility Issue Fee (Or Reissue)</td><td></td></tr><tr><td>143/\$800</td><td>243/\$400</td><td>Design Issue Fee</td><td></td></tr><tr><td>122/\$130</td><td>122/\$130</td><td>Petitions to the Commissioner</td><td></td></tr><tr><td>126/\$180</td><td>126/\$180</td><td>Submission of Information Disclosure Statement</td><td></td></tr><tr><td>179/\$790</td><td>279/\$395</td><td>Request for Continued Examination (RCE)</td><td></td></tr><tr><td>581/\$40</td><td>581/\$40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr><tr><td>146/\$790</td><td>246/\$395</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr><tr><td>149/\$790</td><td>249/\$395</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr><tr><td colspan="2">Other fee (specify):</td><td></td><td></td></tr><tr><td colspan="2">Other fee (specify):</td><td></td><td></td></tr><tr><td colspan="2"><b>SUBTOTAL (3)</b></td><td><b>\$ 0</b></td><td></td></tr></tbody></table> |                                 | Large Entity<br>Fee Code/Fee | Small Entity<br>Fee Code/Fee | Fee Description | Fee Due                | 105/\$130      | 205/\$65  | Surcharge - late filing fee or oath |           | 127/\$50      | 227/\$25                 | Surcharge-late provisional filing fee or cover sheet |           | 147/\$2,520                                     | 147/\$2,520 | For filing a request for reexamination |   | 115/\$120   | 215/\$60 | Extension for response within first month <sup>†</sup> |  | 116/\$450 | 216/\$225 | Extension for response within second month <sup>†</sup> |  | 117/\$1020 | 217/\$510 | Extension for response within third month <sup>†</sup> |  | 118/\$1,590 | 218/\$795              | Extension for response within fourth month <sup>†</sup> |                                 | 128/\$2,160 | 228/\$1,080 | Extension for response within fifth month <sup>†</sup> |  | 119/\$500 | 219/\$250 | Notice of Appeal |    | 141/\$1,500 | 241/\$750 | Petition to revive unintentionally abandoned application |   | 142/\$1,400 | 242/\$700 | Utility Issue Fee (Or Reissue) |     | 143/\$800 | 243/\$400 | Design Issue Fee |      | 122/\$130 | 122/\$130 | Petitions to the Commissioner |     | 126/\$180 | 126/\$180 | Submission of Information Disclosure Statement     |  | 179/\$790 | 279/\$395 | Request for Continued Examination (RCE) |  | 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) |  | 146/\$790 | 246/\$395 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 149/\$790 | 249/\$395 | For each additional invention to be examined (37 CFR 1.129(b)) |  | Other fee (specify): |  |  |  | Other fee (specify): |  |  |  | <b>SUBTOTAL (3)</b> |  | <b>\$ 0</b> |  |
| Large Entity<br>Fee Code/Fee  | Small Entity<br>Fee Code/Fee | Fee Description  | Fee Due                         |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 105/\$130   | 205/\$65                     | Surcharge - late filing fee or oath  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 127/\$50  | 227/\$25                     | Surcharge-late provisional filing fee or cover sheet   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 147/\$2,520   | 147/\$2,520                  | For filing a request for reexamination   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 115/\$120   | 215/\$60                     | Extension for response within first month <sup>†</sup>   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 116/\$450   | 216/\$225                    | Extension for response within second month <sup>†</sup>  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 117/\$1020  | 217/\$510                    | Extension for response within third month <sup>†</sup>   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 118/\$1,590   | 218/\$795                    | Extension for response within fourth month <sup>†</sup>  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 128/\$2,160   | 228/\$1,080                  | Extension for response within fifth month <sup>†</sup>   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 119/\$500   | 219/\$250                    | Notice of Appeal   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 141/\$1,500   | 241/\$750                    | Petition to revive unintentionally abandoned application   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 142/\$1,400   | 242/\$700                    | Utility Issue Fee (Or Reissue)   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 143/\$800   | 243/\$400                    | Design Issue Fee   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 122/\$130   | 122/\$130                    | Petitions to the Commissioner  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 126/\$180   | 126/\$180                    | Submission of Information Disclosure Statement   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 179/\$790   | 279/\$395                    | Request for Continued Examination (RCE)  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 581/\$40  | 581/\$40                     | Recording each patent assignment per property (times number of properties)   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 146/\$790   | 246/\$395                    | Filing a submission after final rejection (37 CFR 1.129(a))  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 149/\$790   | 249/\$395                    | For each additional invention to be examined (37 CFR 1.129(b))   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| Other fee (specify):  |                              |  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| Other fee (specify):  |                              |  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| <b>SUBTOTAL (3)</b>   |                              | <b>\$ 0</b>  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| <b>FEE CALCULATION (fees effective 10/01/2001)</b><br><b>1. FILING FEE</b><br><table border="1"><thead><tr><th>Large Entity<br/>Fee Code/Fee</th><th>Small Entity<br/>Fee Code/Fee</th><th>Fee Description</th><th>Fee Due</th></tr></thead><tbody><tr><td>101/\$300</td><td>201/\$150</td><td>Utility Filing</td><td></td></tr><tr><td>106/\$200</td><td>206/\$100</td><td>Design Filing</td><td></td></tr><tr><td>108/\$300</td><td>208/\$150</td><td>Reissue</td><td></td></tr><tr><td>114/\$200</td><td>214/\$100</td><td>Provisional Filing</td><td></td></tr><tr><td colspan="2"><b>SUBTOTAL (1)</b></td><td></td><td></td></tr></tbody></table>  |                              | Large Entity<br>Fee Code/Fee   | Small Entity<br>Fee Code/Fee    | Fee Description              | Fee Due                      | 101/\$300       | 201/\$150              | Utility Filing |           | 106/\$200                           | 206/\$100 | Design Filing |                          | 108/\$300  | 208/\$150 | Reissue   |             | 114/\$200                              | 214/\$100   | Provisional Filing  |          | <b>SUBTOTAL (1)</b>                                    |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| Large Entity<br>Fee Code/Fee  | Small Entity<br>Fee Code/Fee | Fee Description  | Fee Due                         |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 101/\$300   | 201/\$150                    | Utility Filing   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 106/\$200   | 206/\$100                    | Design Filing  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 108/\$300   | 208/\$150                    | Reissue  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 114/\$200   | 214/\$100                    | Provisional Filing   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| <b>SUBTOTAL (1)</b>   |                              |  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| <b>2. CLAIMS</b><br><table border="1"><thead><tr><th>Large Entity<br/>Fee Code/Fee</th><th>Small Entity<br/>Fee Code/Fee</th><th>Fee Description</th></tr></thead><tbody><tr><td>103/\$50</td><td>203/\$25</td><td>Claims in excess of 20</td></tr><tr><td>102/\$200</td><td>202/\$100</td><td>Independent claims in excess of 3</td></tr><tr><td>104/\$360</td><td>204/\$180</td><td>Multiple dependent claim</td></tr><tr><td>109/\$200</td><td>209/\$100</td><td>Reissue independent claims over original patent</td></tr><tr><td>110/\$50</td><td>210/\$25</td><td>Reissue claims in excess of 20 and over original patent</td></tr></tbody></table>  |                              | Large Entity<br>Fee Code/Fee   | Small Entity<br>Fee Code/Fee    | Fee Description              | 103/\$50                     | 203/\$25        | Claims in excess of 20 | 102/\$200      | 202/\$100 | Independent claims in excess of 3   | 104/\$360 | 204/\$180     | Multiple dependent claim | 109/\$200  | 209/\$100 | Reissue independent claims over original patent | 110/\$50    | 210/\$25                               | Reissue claims in excess of 20 and over original patent | <table border="1"><thead><tr><th colspan="2">(Col. 1)</th><th colspan="2">(Col. 2)</th><th colspan="2">(Col. 3)</th><th colspan="2">Fee</th><th colspan="2">Fee Due</th></tr><tr><th>For</th><th>No. of Existing Claims</th><th>minus*</th><th>Highest No. Previously Paid For</th><th>=</th><th>Extra**</th><th>x</th><th></th><th>=</th><th></th></tr></thead><tbody><tr><td>TOTAL</td><td>31</td><td>minus*</td><td>or 28</td><td>=</td><td>3</td><td>x</td><td>50</td><td>=</td><td>150</td></tr><tr><td>INDEP</td><td>4</td><td>minus*</td><td>or 3</td><td>=</td><td>1</td><td>x</td><td>200</td><td>=</td><td>200</td></tr><tr><td colspan="10">[ ] First presentation of multiple dependent claim</td></tr></tbody></table><br><p>* Subtract the greater number of Col. 2<br/>** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3</p> <p><b>SUBTOTAL (2)</b> <b>(\$ 350)</b></p> |          | (Col. 1)   |  | (Col. 2)  |           | (Col. 3)  |  | Fee        |           | Fee Due  |  | For         | No. of Existing Claims | minus*  | Highest No. Previously Paid For | =           | Extra**     | x  |  | =         |           | TOTAL            | 31 | minus*      | or 28     | =  | 3 | x           | 50        | =                              | 150 | INDEP     | 4         | minus*           | or 3 | =         | 1         | x                             | 200 | =         | 200       | [ ] First presentation of multiple dependent claim |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| Large Entity<br>Fee Code/Fee  | Small Entity<br>Fee Code/Fee | Fee Description  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 103/\$50  | 203/\$25                     | Claims in excess of 20   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 102/\$200   | 202/\$100                    | Independent claims in excess of 3  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 104/\$360   | 204/\$180                    | Multiple dependent claim   |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 109/\$200   | 209/\$100                    | Reissue independent claims over original patent  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| 110/\$50  | 210/\$25                     | Reissue claims in excess of 20 and over original patent  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| (Col. 1)  |                              | (Col. 2)   |                                 | (Col. 3)                     |                              | Fee             |                        | Fee Due        |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| For   | No. of Existing Claims       | minus*   | Highest No. Previously Paid For | =                            | Extra**                      | x               |                        | =              |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| TOTAL   | 31                           | minus*   | or 28                           | =                            | 3                            | x               | 50                     | =              | 150       |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| INDEP   | 4                            | minus*   | or 3                            | =                            | 1                            | x               | 200                    | =              | 200       |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |
| [ ] First presentation of multiple dependent claim  |                              |  |                                 |                              |                              |                 |                        |                |           |                                     |           |               |                          |  |           |   |             |  |   |   |          |  |  |           |           |   |  |            |           |  |  |             |                        |   |                                 |             |             |  |  |           |           |                  |    |             |           |  |   |             |           |                                |     |           |           |                  |      |           |           |                               |     |           |           |  |  |           |           |   |  |          |          |  |  |           |           |   |  |           |           |  |  |                      |  |  |  |                      |  |  |  |                     |  |             |  |

|                       |                |                                 |                  |
|-----------------------|----------------|---------------------------------|------------------|
| <b>SUBMITTED BY</b>   |                | <b>Complete (if applicable)</b> |                  |
| Typed or Printed Name | Mark W. Rygiel | Reg. Number                     | 45,871           |
| Signature             |                | Date                            | February 2, 2005 |

<sup>†</sup> Request for Extension of Time per 37 CFR 1.136 (a)(3) made hereby



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Avery J. Evans et al.

Application Serial No.: 10/074,959

Examiner: D. Bonderer

Filed: February 12, 2002

Group: 3732

For: MULTI-USE SURGICAL CEMENT DISPENSER APPARATUS AND KIT  
FOR SAME

Attorney Docket #: SPEC-6150 (53990-00601)

Commissioner for Patents  
Alexandria, VA 22313-1450

**AMENDMENT AND RESPONSE**

Dear Sir:

In response to the Office Action dated November 19, 2004, Applicant respectfully submits the following amendments and remarks. Amendments are provided in the Listing of Claims which begins on page 2 of this paper. Applicants remarks begin on page 11 of this paper.

02/04/2005 AWONDAF1 00000064 032469 10074959

01 FC:1201 200.00 DA  
02 FC:1202 50.00 DA

02/07/2005 AWONDAF1 00000074 032469 10074959

01 FC:1202 100.00 DA